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B22C (Official Form 22C) (Chapter 13) (12/10)

In re	Weston Lonnie McGill Jessica A. McGill	According to the calculations required by this statement: ☐ The applicable commitment period is 3 years.
Case Nu		 ■ The applicable commitment period is 5 years. ■ Disposable income is determined under § 1325(b)(3).
	(If known)	☐ Disposable income is not determined under § 1325(b)(3). (Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INCOME		
1	Marital/filing status. Check the box that applies and complete the balance of this part of this statem a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.	ment as directed.	
	b. ■ Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income	e") for Lines 2-10	
	All figures must reflect average monthly income received from all sources, derived during the six	Column A	Column B
	calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.	Debtor's Income	Spouse's Income
2	Gross wages, salary, tips, bonuses, overtime, commissions.	\$ 7,647.91	\$ 0.00
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.		
	Debtor Spouse		
	a. Gross receipts \$ 0.00 \$ 0.00		
	b. Ordinary and necessary business expenses \$ 0.00 \$ 0.00 c. Business income Subtract Line b from Line a	\$ 0.00	\$ 0.00
4	the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. Debtor Spouse		
	a. Gross receipts \$ 0.00 \$ 0.00		
	b. Ordinary and necessary operating expenses \$ 0.00 \$ 0.00 c. Rent and other real property income Subtract Line b from Line a	\$ 0.00	\$ 0.00
5		\$ 0.00	\$ 0.00
6		\$ 0.00	\$ 0.00
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.	\$ 0.00	\$ 0.00
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:		
	Unemployment compensation claimed to		

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.			
	Debtor Spouse			
	a.	0.00	¢	0.00
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9	0.00	φ	0.00
10	in Column B. Enter the total(s).	7.91	\$	0.00
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		7,647	7.91
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD			
12	Enter the amount from Line 11	\$	7,64	17.91
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. a.	ne		
	Total and enter on Line 13	\$		0.00
14	Subtract Line 13 from Line 12 and enter the result.	\$	7,64	1 7.91
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	_		
16	Applicable median family income. Enter the median family income for applicable state and household size. (The information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	is	·	
	a. Enter debtor's state of residence: UT b. Enter debtor's household size: 7	\$	89,32	25.00
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. □ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment op of page 1 of this statement and continue with this statement. ■ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment at the top of page 1 of this statement and continue with this statement. 			
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME			
18	Enter the amount from Line 11.	\$	7,64	1 7.91
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such a payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. A	S		
	c. \$			
	Total and enter on Line 19.	\$		0.00
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	s	7.64	17.91

91,77) by the number 12 and	ly the amount from Line 2	Multip	come for § 1325(b)(3). N	alized current monthly income he result.		21
89,32		e 16.	m Lin	ne. Enter the amount from	cable median family incon	Applic	22
		ceed as directed.	nd pro	eck the applicable box ar	cation of § 1325(b)(3). Che	Applic	
ed under §					e amount on Line 21 is mo 25(b)(3)" at the top of page		23
					e amount on Line 21 is no 25(b)(3)" at the top of page		
	OM INCOME	EDUCTIONS FR	OF I	ALCULATION (Part IV. C.		
	nue Service (IRS)	s of the Internal Reve	ndaro	eductions under Star	Subpart A: D		
3 2,29	Expenses for the m the clerk of the e allowed as exemptions	ards for Allowable Living www.usdoj.gov/ust/ or frober that would currently be	Stand able at ne nun	ount from IRS National This information is availage number of persons is the	nal Standards: food, appar in Line 24A the "Total" am able number of persons. (Taptcy court.) The applicable ir federal income tax return	Enter i applica bankru	24A
	onal Standards for able at able number of persons are 65 years of age or ry that would currently onal dependents whom and enter the result in d enter the result in Line	nd in Line a2 the IRS Nati (This information is avail Enter in Line b1 the applied the number of persons who is the number in that categories the number of any additunt for persons under 65, or persons 65 and older, and	age, a older. ourt.) oplical egory i irn, plu al amo ount fo	ersons under 65 years of a ersons 65 years of age or elerk of the bankruptcy of ad enter in Line b2 the ap- persons in each age cate or federal income tax retury. Line b1 to obtain a total te b2 to obtain a total amo	F-Pocket Health Care for pe F-Pocket Health Care for pe F-Pocket Health Care for pe asdoj.gov/ust/ or from the care under 65 years of age, an (The applicable number of owed as exemptions on your pport.) Multiply Line a1 by 1. Multiply Line a2 by Line dd Lines c1 and c2 to obtain	Out-of- Out-of- www.u who ar older. (be allo you su Line cl	24B
	er	ons 65 years of age or old	Pers		ons under 65 years of age	Perso	
	144	Allowance per person	a2.	60	Allowance per person	a1.	
	0	Number of persons	b2.	7	N	b1.	
					Number of persons	01.	
5 42	0.00	Subtotal	c2.	420.00	Subtotal	c1.	
5 42	e IRS Housing and is information is family size consists of	ses. Enter the amount of the county and family size. (The ptcy court). The applicable	expen able c	atilities; non-mortgage of the application from the clerk of the both allowed as exemption.	-	c1. Local S Utilitie availab the nur	25A
	e IRS Housing and is information is family size consists of rn, plus the number of the amount of the IRS his information is family size consists of rn, plus the number of onthly Payments for any	ces. Enter the amount of the purple and family size. (The ptcy court). The applicable pur federal income tax retrese. Enter, in Line a below recounty and family size (toptcy court) (the applicable pur federal income tax retrested the total of the Average M	expen able coankru s on y expen or you bankru s on y ine b	atilities; non-mortgage of the application from the clerk of the bose allowed as exemption you support. atilities; mortgage/rent of mortgage/rent expense for from the clerk of the bose allowed as exemption you support); enter on Lated in Line 47; subtract	Subtotal Standards: housing and uses Standards; non-mortgage ble at www.usdoj.gov/ust/ omber that would currently be	Local S Utilitie availab the nur any add Local S Housin availab the nur any add debts s	25A 25B
	e IRS Housing and is information is family size consists of rn, plus the number of the amount of the IRS his information is family size consists of rn, plus the number of onthly Payments for any	ses. Enter the amount of the punty and family size. (The ptcy court). The applicable pur federal income tax retreses. Enter, in Line a below recounty and family size (toptcy court) (the applicable pur federal income tax retrest the total of the Average M b from Line a and enter the pense \$	expen able coankru as on y expensor you bankru as on y ine b t Line	atilities; non-mortgage of the application from the clerk of the bose allowed as exemptionary you support. atilities; mortgage/rent of the bose allowed as exemptionary from the clerk of the bose allowed as exemptionary you support); enter on Lated in Line 47; subtractero. Standards; mortgage/ren	Subtotal Standards: housing and uses Standards; non-mortgage of the at www.usdoj.gov/ust/omber that would currently diditional dependents whom standards: housing and using and Utilities Standards; of the at www.usdoj.gov/ust/omber that would currently diditional dependents whom secured by your home, as ster an amount less than zee IRS Housing and Utilities	Local S Utilitie availab the nur any add Local S Housin availab the nur any add debts s not ent	
50	e IRS Housing and is information is family size consists of rn, plus the number of the IRS his information is family size consists of rn, plus the number of rn, plus the number of onthly Payments for any e result in Line 25B. Do 1,233.00 7.41	ses. Enter the amount of the punty and family size. (The ptcy court). The applicable pur federal income tax retreses. Enter, in Line a below recounty and family size (to ptcy court) (the applicable pur federal income tax retrese the total of the Average M b from Line a and enter the purchase see \$ \$	expen able coankru as on y expensor you bankru as on y ine b t Line	atilities; non-mortgage of the application from the clerk of the bose allowed as exemptionary you support. atilities; mortgage/rent of the bose allowed as exemptionary the clerk of the bose allowed as exemptionary you support); enter on Lated in Line 47; subtractero. Standards; mortgage/rent t for any debts secured beline 47	Standards: housing and uses Standards; non-mortgage of the www.usdoj.gov/ust/ of the www.usdoj.g	Local S Utilitie availab the nur any add Local S Housin availab the nur any add debts s not ent a. b.	
	e IRS Housing and is information is family size consists of irn, plus the number of the IRS his information is family size consists of irn, plus the number of irn, plus the n	ces. Enter the amount of the county and family size. (The ptcy court). The applicable our federal income tax retrest. Enter, in Line a below recounty and family size (toptcy court) (the applicable our federal income tax retrest the total of the Average M be from Line a and enter the court of the same statements.) Subtract Line before the county and same statements.	expenable control on your cont	atilities; non-mortgage of the application from the clerk of the both allowed as exemptionary you support. atilities; mortgage/rent of mortgage/rent expense for from the clerk of the both allowed as exemptionary you support); enter on Lated in Line 47; subtractero. Standards; mortgage/rent t for any debts secured beine 47 asse	Standards: housing and uses Standards; non-mortgage at www.usdoj.gov/ust/omber that would currently be ditional dependents whom Standards: housing and use and Utilities Standards; ole at www.usdoj.gov/ust/omber that would currently be ditional dependents whom secured by your home, as ster an amount less than zo IRS Housing and Utilities Average Monthly Paymen home, if any, as stated in I Net mortgage/rental expensive.	Local S Utilitie availab the nur any add Local S Housin availab the nur any add debts s not ent a. b.	
50	e IRS Housing and is information is family size consists of irn, plus the number of the IRS his information is family size consists of irn, plus the number of irn, plus the n	ces. Enter the amount of the county and family size. (The ptcy court). The applicable our federal income tax retrests. Enter, in Line a below recounty and family size (toptcy court) (the applicable our federal income tax retrests the total of the Average M befrom Line a and enter the county and family size (toptcy court) (the applicable our federal income tax retrests to the total of the Average M befrom Line a and enter the county of the form Line and enter the county of the county	expensable construction of the construction of	atilities; non-mortgage of the application from the clerk of the both allowed as exemptionary you support. Intilities; mortgage/rent of the both allowed as exemptionary of the both allowed as exemptionary you support); enter on Leated in Line 47; subtractero. Standards; mortgage/rent to for any debts secured beline 47 asse. Intilities; adjustment. If the allowance to which	Standards: housing and uses Standards; non-mortgage of the www.usdoj.gov/ust/ of the www.usdoj.g	Local S Housin availab the nur any add debts s not ent a. b. Local S Local S Local S Local S S Local S S Local S S S S Local S S S S S S Local S S S S S S S S C Local S S S S S S S S S C Local S S S S S S S S S S S C Local S S S S S S S S S S S S S S S S S S S	

	Local Standards: transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.		an	
	Check the number of vehicles for which you pay the operating expen	ses or for which the operating expense	es are	
27A	included as a contribution to your household expenses in Line 7. \square			
	If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in th Census Region. (These amounts are available at www.usdoj.gov/ust/	ount from IRS Local Standards: e "Operating Costs" amount from IRS e applicable Metropolitan Statistical A	Area or	\$ 472.00
27B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public T Standards: Transportation. (This amount is available at www.usdoj.g court.)	you are entitled to an additional deduransportation" amount from the IRS L	ction for ocal	\$ 0.00
28	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.) ■ 1 □ 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from th (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Lithe result in Line 28. Do not enter an amount less than zero.	rship/lease expense for more than two e IRS Local Standards: Transportation court); enter in Line b the total of the	ı Average	
	a. IRS Transportation Standards, Ownership Costs	\$	517.00	
	Average Monthly Payment for any debts secured by Vehicle b. 1 as stated in Line 47	\$	197.45	
	b. 1, as stated in Line 47 c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	197.45	\$ 319.55
29	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from th (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero.	court); enter in Line b the total of the	Average	
	a. IRS Transportation Standards, Ownership Costs	\$	0.00	
	Average Monthly Payment for any debts secured by Vehicle b. 2 as stated in Line 47	\$	0.00	
	b. 2, as stated in Line 47 c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	0.00	\$ 0.00
30	Other Necessary Expenses: taxes. Enter the total average monthly estate, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sales	expense that you actually incur for all accome taxes, self employment taxes, so		\$ 391.00
31	Other Necessary Expenses: involuntary deductions for employme deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu	retirement contributions, union dues,	, and	\$ 0.00
32				
	Other Necessary Expenses: life insurance. Enter total average mor life insurance for yourself. Do not include premiums for insurance any other form of insurance.			\$ 0.00
33	Other Necessary Expenses: life insurance. Enter total average mor life insurance for yourself. Do not include premiums for insurance	on your dependents, for whole life of the control o	or for red to	\$ 0.00
33	Other Necessary Expenses: life insurance. Enter total average mor life insurance for yourself. Do not include premiums for insurance any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total pay pursuant to the order of a court or administrative agency, such as	tal monthly amount that you are requires spousal or child support payments. It ysically or mentally challenged child ion that is a condition of employment.	red to Oo not l. Enter and for	

322C (C	Official Fo	orm 22C) (Chapter 13) (12/10)	rage 5 or r			5
36	health insurar	Necessary Expenses: health care. Enter the totacare that is required for the health and welfare of ace or paid by a health savings account, and that it payments for health insurance or health savings	yourself or your dependents, t s in excess of the amount ente	that is not reimbursed by red in Line 24B. Do not	\$	0.00
37	actually pagers,	Necessary Expenses: telecommunication service y pay for telecommunication services other than y call waiting, caller id, special long distance, or it or that of your dependents. Do not include any	your basic home telephone and neternet service-to the extent no	d cell phone service - such as ecessary for your health and	\$	40.00
38	Total l	Expenses Allowed under IRS Standards. Enter	the total of Lines 24 through	37.	\$	5,664.14
		Subpart B: Additio	onal Living Expense De	ductions		
		Note: Do not include any exp	penses that you have lis	ted in Lines 24-37		
	Health the cate depend	Insurance, Disability Insurance, and Health S egories set out in lines a-c below that are reasonal ents.	avings Account Expenses. L	ist the monthly expenses in a spouse, or your		
39	a.	Health Insurance	\$	0.00		
	b.	Disability Insurance	\$	0.00		
	c.	Health Savings Account	\$	0.00	¢.	0.00
		nd enter on Line 39			\$	0.00
	If you below:	do not actually expend this total amount, state	your actual total average mon	thly expenditures in the space		
	\$					
40	Contine expense ill, or co	used contributions to the care of household or fees that you will continue to pay for the reasonable disabled member of your household or feet household or	e and necessary care and supp	ort of an elderly, chronically	Φ.	0.00
	- -	es. Do not include payments listed in Line 34.			\$	0.00
41		tion against family violence. Enter the total aver y incur to maintain the safety of your family under				
		able federal law. The nature of these expenses is r			\$	0.00
42	Standa	energy costs. Enter the total average monthly ards for Housing and Utilities that you actually exercise with documentation of your actual expenses,	pend for home energy costs.	You must provide your case		
		d is reasonable and necessary.	·		\$	0.00
43	actually school docum	tion expenses for dependent children under 18. y incur, not to exceed \$147.92 per child, for atter by your dependent children less than 18 years of entation of your actual expenses, and you mustary and not already accounted for in the IRS S	dance at a private or public el age. You must provide your t explain why the amount cla	ementary or secondary case trustee with	\$	0.00
44	expens Standa or fron	onal food and clothing expense. Enter the total are exceed the combined allowances for food and rds, not to exceed 5% of those combined allowand the clerk of the bankruptcy court.) You must dable and necessary.	clothing (apparel and services ces. (This information is avail) in the IRS National able at www.usdoj.gov/ust/	\$	0.00
45	Charit	able contributions. Enter the amount reasonably outions in the form of cash or financial instrument (1)-(2). Do not include any amount in excess of	s to a charitable organization	as defined in 26 U.S.C. §	\$	0.00
	170(0)	(1) (2). 20 not motion only amount in excess of	==		Ψ	0.00

Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.

46

0.00

				Subpart C: Deductions for De	bt]	Payn	nent			
47	or cl so	wn, hec che ase,	list the name of creditor, identi k whether the payment includes duled as contractually due to each	s. For each of your debts that is secured fy the property securing the debt, state to taxes or insurance. The Average Month ch Secured Creditor in the 60 months for additional entries on a separate page.	he A lly F llov	Averag ayme ving th	ge Monthly int is the to he filing of	Payment, and tal of all amounts the bankruptcy		
			Name of Creditor	Property Securing the Debt		Mor	erage nthly ment	Does payment include taxes or insurance		
		a.	Prime Acceptance	2003 Ford F250 Location: In Debtor's possession	\$		197.45	□yes ■no		
		b.	Uintah County Treasurer	County Lists as 3 contiguous property descriptions Primary Residence: 1. 1.0 Acres (serial 06:069:0021) Value:\$6840.00 6632 E. 6500 S. Vernal, UT (Joint w/ Tharesa Bartlett) 256 Acres (serial 06:069:0022) Value: \$41219.00 6644 E 6	\$		7.41	□yes ■no		
		0.	Oman County Trouburor	0044 E 0	_	otal: 1	Add Lines		\$	204.86
48	ye pa su	our ayn ıms	deduction 1/60th of any amoun nents listed in Line 47, in order in default that must be paid in ollowing chart. If necessary, list Name of Creditor	essary for your support or the support o t (the "cure amount") that you must pay to maintain possession of the property. order to avoid repossession or foreclosu additional entries on a separate page. Property Securing the Debt	the The	credit	tor in addit amount wo nd total any	ion to the uld include any	\$	0.00
49	p	rioi		laims. Enter the total amount, divided ny claims, for which you were liable at ch as those set out in Line 33.					\$	49.68
			pter 13 administrative expense ting administrative expense.	es. Multiply the amount in Line a by the	amo	ount ii	n Line b, a	nd enter the		
50		n. O.	issued by the Executive Offi information is available at with the bankruptcy court.)	Chapter 13 plan payment. district as determined under schedules ice for United States Trustees. (This //www.usdoj.gov/ust/ or from the clerk of utive expense of chapter 13 case	\$ x To	otal: N	Multiply Li	285.00 6.20 nes a and b	\$	17.67
51	Т	ota	l Deductions for Debt Paymen	at. Enter the total of Lines 47 through 5	0.				\$	272.21
	•			Subpart D: Total Deductions f	ron	n Inc	come		-	
52	T	ota	l of all deductions from incom	e. Enter the total of Lines 38, 46, and 5	51.				\$	5,936.35
	•		Part V. DETERMI	NATION OF DISPOSABLE 1	NO	COM	E UNDI	ER § 1325(b)(2))	
53	Т	ota	l current monthly income. En	ter the amount from Line 20.					\$	7,647.91
54	p	ayn	nents for a dependent child, repo	vaverage of any child support payments orted in Part I, that you received in accoury to be expended for such child.					\$	0.00

55	wage	lified retirement deductions. Enter the monthly total of (a) are as contributions for qualified retirement plans, as specified in § 362(b)(19).			\$	0.00
56	Tota	of all deductions allowed under § 707(b)(2). Enter the amount	ount from Line 5	2.	\$	5,936.35
	If neo	existion for special circumstances. If there are special circumstances is no reasonable alternative, describe the special circumstance cessary, list additional entries on a separate page. Total the existe your case trustee with documentation of these expenses the special circumstances that make such expense necessary as	es and the resulti penses and enter s and you must p	ng expenses in lines a-c below. the total in Line 57. You must		
57		Nature of special circumstances	Amou	int of Expense		
	a.		\$			
	b.		\$			
	c.		\$			
			Total	: Add Lines	\$	0.00
58	Tota resul	l adjustments to determine disposable income. Add the amet.	ounts on Lines 54	4, 55, 56, and 57 and enter the	\$	5,936.35
59		thly Disposable Income Under § 1325(b)(2). Subtract Line Part VI. ADDITIONAL	EXPENSE C	LAIMS	\$	1,711.56
59	Othe of yo 707(1	• • •	EXPENSE C erwise stated in that deduction from	LAIMS nis form, that are required for the n your current monthly income u	e health	and welfare
	Othe of yo 707(1	Part VI. ADDITIONAL er Expenses. List and describe any monthly expenses, not other out and your family and that you contend should be an addition b)(2)(A)(ii)(I). If necessary, list additional sources on a separa- item. Total the expenses.	EXPENSE C erwise stated in that deduction from	LAIMS his form, that are required for the n your current monthly income unres should reflect your average	e health	and welfare
59 60	Othe of yo 707(1	Part VI. ADDITIONAL er Expenses. List and describe any monthly expenses, not other ou and your family and that you contend should be an addition b)(2)(A)(ii)(I). If necessary, list additional sources on a separate	EXPENSE Control of the control of th	LAIMS nis form, that are required for the n your current monthly income u	e health	and welfare
	Other of you 707(1 each	Part VI. ADDITIONAL er Expenses. List and describe any monthly expenses, not other out and your family and that you contend should be an addition b)(2)(A)(ii)(I). If necessary, list additional sources on a separa- item. Total the expenses.	EXPENSE Contervise stated in the page and deduction from the page. All figures	LAIMS his form, that are required for the n your current monthly income ures should reflect your average Monthly Amount	e health	and welfare
	Othe of you 707(leach	Part VI. ADDITIONAL er Expenses. List and describe any monthly expenses, not other out and your family and that you contend should be an addition b)(2)(A)(ii)(I). If necessary, list additional sources on a separa- item. Total the expenses.	EXPENSE Contervise stated in the page. All figures	LAIMS his form, that are required for the n your current monthly income unres should reflect your average Monthly Amount \$ \$	e health	and welfare
	Other of you 707(1 each	Part VI. ADDITIONAL er Expenses. List and describe any monthly expenses, not other ou and your family and that you contend should be an addition b)(2)(A)(ii)(I). If necessary, list additional sources on a separa item. Total the expenses. Expense Description	EXPENSE Control of the control of th	LAIMS his form, that are required for the n your current monthly income ures should reflect your average Monthly Amount	e health	and welfare
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